IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD
510 EAST 12TH, SUITE 1A
DES MOINES, IA 50319
Fax: (515)281-4073
www.iowa.gov/ethics

[Reset Form]

Iowa Code section 8.7 requires all gifts and bequests given to any department of the state of Iowa or received by the Governor on behalf of the state be reported to the Iowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

FORM-GB

Gift or Bequest Information received by a department or accepted by the Governor on behalf of the state

For office use only

Indexed _____

Audited _____

Checked _____

Computer _____

DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:

Clarinda Correctional Facility

Name of Department or Office
2000 N. 16th Street   Clarinda, IA 51632

Mailing Address   City, State, Zip Code
712-542-5634

Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Meredith Baker

Name

Mailing Address (if different from above)   City, State, Zip (if different from above)
meredith.baker@iowa.gov   712-542-6107

Email Address   Area Code & Telephone Number (if different from above)

DONOR OF GIFT OR BEQUEST:

Corydon Sanctuary Church

Name

1515 150th Street   Corydon, IA 50060

Mailing Address   City, State, Zip Code

515-745-0408

Area Code & Telephone Number

Email Address (optional)

09/06/17	$50.00
Date of Gift or Bequest	Amount/Value*

*value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".

Provide a description of the gift or bequest and purpose thereof:

$50 check as a donation for our Chapel fund.

Criteria to use this form:

Receipt of any gift or bequest that is received by any department of the state or received by the Governor on behalf of the state.

Statement of Affirmation:

I, __Randy Gibbs_____ affirm that the gift or bequest reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

_____   09/06/17
Signature   Date